

STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER <u>Bison Courier</u>		2. DATE <u>10/26/11</u>
3. FREQUENCY OF ISSUE <u>weekly</u>	3A. NO. OF ISSUES PUBLISHED ANNUALLY <u>52</u>	3B. ANNUAL SUBSCRIPTION PRICE <u>\$34/mo \$39/yr</u>
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) <u>Bison Courier P.O. Box 429 122 A. West Main St. Bison, SD 57620-0429, Perkins Co.</u>		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) <u>on back</u>		
6. FULL NAME OF PUBLISHER: <u>Donald Ravellette</u>		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.)		
FULL NAME		COMPLETE MAILING ADDRESS
<u>on Back</u>		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.) <u>on back</u>		
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	<u>800</u>	<u>800</u>
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors and counter sales.	<u>82</u>	<u>85</u>
2. Mail Subscription (Paid and or requested)	<u>617</u>	<u>617</u>
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	<u>699</u>	<u>702</u>
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	<u>60</u>	<u>60</u>
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	<u>2</u>	<u>0</u>
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	<u>759</u>	<u>762</u>
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	<u>35</u>	<u>33</u>
2. Return from News Agents	<u>6</u>	<u>5</u>
G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A)	<u>800</u>	<u>800</u>

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
I swear that the statements made by me are true, correct, and complete:

Don Ravellette
(Signature)

Publisher
(Title)

State of South Dakota)
County of Haakon)

(Seal)

Sworn to before me this 26 day of Oct, 2011

Jalene Haynes
Notary Public

My commission expires: 4-3-2015

Owners:

Ravellette Publications, Inc.
P O Box 788
Philip, SD 57567-0788

Donald Ravellette
P O Box 633
Philip, SD 57567-0633

Bondholders, Mortgages & Other Security Holders:

First National Bank
P O Box 910
Philip, SD 57567-0910